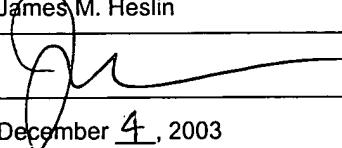
 TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/624,451
		Filing Date	July 21, 2003
		First Named Inventor	CHEW, SUNMI
		Art Unit	Unassigned
		Examiner Name	Unassigned
Total Number of Pages in This Submission		Attorney Docket Number	021629-000400US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard PTO/SB/08A & PTO/SB/08B 4 Reference Copies PCT International Search Report (1 page total)
		Remarks <div style="border: 1px solid black; padding: 5px;">The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</div>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Townsend and Townsend and Crew LLP James M. Heslin	
Signature		
Date	December 4, 2003	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Edward Masinas		
Signature		Date	December 4, 2003

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On 12-4-03

DEC 08 2003

TOWNSEND and TOWNSEND and CREW LLP

Edward Masinas

Edward Masinas

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

SUNMI CHEW et al.

Application No.: 10/624,451

Filed: July 21, 2003

For: APPARATUS AND METHODS
FOR DELIVERY OF VARIABLE
LENGTH STENTS

Examiner: Unassigned

Art Unit: Unassigned

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

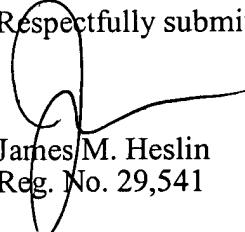
Also enclosed is a copy of the International Search report corresponding to a related PCT application.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,


James M. Heslin
Reg. No. 29,541

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60091937 v1

Substitute for form 1449B/PTO			Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>			Application Number	10/624,451
			Filing Date	July 21, 2003
			First Named Inventor	CHEW, SUNMI
			Art Unit	Unassigned
			Examiner Name	Unassigned
Sheet	1	of	Attorney Docket Number	021629-000400US



U.S. PATENT DOCUMENTS+						
Examiner Initials*	Cite No. ¹	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code ² (if known)			
1		4,994,069		02-19-1991	RITCHART et al.	
2		6,451,025		09-17-2002	JERVIS	
3		6,511,468		01-28-2003	GRAGG et al.	

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No. ¹	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴ Kind Code ⁵ (if known)				

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T ²

Examiner Signature	Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.